THE ASSISTANT COMMISSIONER FOR PATENTS P.O. Box 1450

Alexandria, VA 22313-1450

Assignee Name: International Business Machines Corporation

Assignee Residence: Armonk, New York

Sir:

Transmitted herewith for filing is the Patent Application of:

Inventors: Zachary Merlynn Loafman

For: SYSTEM AND METHOD OF SQUEEZING MEMORY SLABS EMPTY



DOCKET NUMBER: AUS920030432US1

Enclosed are:

X Patent Specification and Declaration

sheets of drawing(s). (Informal/Formal)

X An assignment of the invention to International Business Machines Corporation (includes Recordation Form Cover Sheet).

____ A certified copy of a ____ application.

X Information Disclosure Statement, PTO 1449 and copies 2 of references.

The filing fee has been calculated as shown below:

For	Number Filed	Number Extra			Rate		Fe	e
Basic Fee:							\$ 7	750.00
Total Claims:	21 – 20	1		X	18 =		\$	18.00
Indep. Claims	3 - 3	_10		X	0 =		\$	0.00
MULTIPLE DEPENDENT CLAIM PRESENTED				X	280 =		\$	0.00
						TOTAL	\$ 7	768.00

X Please charge my Deposit Account No. <u>09-0447</u> in the amount of <u>\$ 768.00</u>. A duplicate copy of this sheet is enclosed.

X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <u>09-0447</u>. A duplicate copy of this sheet is enclosed.

X Any additional filing fees required under 37 CFR 1.16.

 \underline{X} Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

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